

HEALTHY RHODE ISLANDERS 2010

Operational Definitions for Healthy Rhode Islanders 2010 Objectives

Rhode Island Department of Health
Center for Health Information and Communication

March 2004



This document summarizes the operational definitions for the 27 objectives included in *Healthy Rhode Islanders 2010*, identifies the data sources, measures, survey questions, periodicity of data collection, and other data issues related to monitoring these objectives over this decade.

Operational Definitions for *Healthy Rhode Islanders 2010* objectives are based upon comparable national Healthy People 2010 objective operational definitions. The national operational definitions are from the U.S. Department of Health and Human Services publication, *Tracking Healthy People 2010*,¹ which is available electronically at: <http://www.cdc.gov/nchs/hphome.htm>

Additional information on the Rhode Island data sources can be found in the most recent edition of the *Health Data Inventory: A Compendium of Data Sources Maintained by the Rhode Island Department of Health* (<http://www.health.state.ri.us/chic/statistics/data2002.pdf>).

Operational definitions were prepared by:

Colleen M. Ryan, M.P.H.
Office of Health Statistics
Rhode Island Department of Health
Room 407 Cannon Building
3 Capitol Hill
Providence, Rhode Island 02908

Phone: (401) 222-2550
Fax: (401) 273-4350

¹U.S. Department of Health and Human Services. *Tracking Healthy People 2010*. Washington, DC: U.S. Government Printing Office, November 2000.

Physical Activity

1-1. Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day. (Healthy People 2010 Objective 22-2)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP).
National Data Source	National Health Interview Survey (NHIS), CDC, NCHS (See Comments).
Measure	Percent
Baseline	22 (1998 and 2000 combined).
Numerator	Number of adults aged 18 years and older who report light or moderate physical activity for at least 30 minutes five or more times per week.
Denominator	Number of adults aged 18 years and older in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 1998 and 2000 Behavioral Risk Factor Surveillance System:</p> <p>➤ 1. During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?</p> <p style="padding-left: 40px;">Yes No Don't know/Not sure Refused</p> <p>If yes:</p> <p>➤ 2. What type of physical activity or exercise did you spend the most time doing during the past month?</p> <p style="padding-left: 40px;">Activity [specify]: — —</p>

HEALTHY RHODE ISLANDERS 2010

- | | | |
|---|------------------------------------|--------------------------------|
| 01. Aerobics class | 18. Hiking - cross-country | 39. Snow skiing |
| 02. Backpacking | 19. Home exercise | 40. Soccer |
| 03. Badminton | 20. Horseback riding | 41. Softball |
| 04. Basketball | 21. Hunting large game - deer, elk | 42. Squash |
| 05. Bicycling for pleasure | 22. Jogging | 43. Stair climbing |
| 06. Boating (canoeing, rowing, sailing for pleasure or camping) | 23. Judo/karate | 44. Stream fishing in waders |
| 07. Bowling | 24. Mountain climbing | 45. Surfing |
| 08. Boxing | 25. Mowing lawn | 46. Swimming laps |
| 09. Calisthenics | 26. Paddleball | 47. Table tennis |
| 10. Canoeing/rowing - in competition | 27. Painting/papering house | 48. Tennis |
| 11. Carpentry | 28. Racketball | 49. Touch football |
| 12. Dancing-aerobics/ballet | 29. Raking lawn | 50. Volleyball |
| 13. Fishing from river bank or boat | 30. Running | 51. Walking |
| 14. Gardening (spading, weeding, digging, filling) | 31. Rope skipping | 52. Waterskiing |
| 15. Golf | 32. Scuba diving | 53. Weight lifting |
| 16. Handball | 33. Skating - ice or roller | 54. Other _____ |
| 17. Health club exercise | 34. Sledding, tobogganing | 55. Bicycling machine exercise |
| | 35. Snorkeling | 56. Rowing machine exercise |
| | 36. Snowshoeing | |
| | 37. Snow shoveling by hand | |
| | 38. Snow blowing | |

If response is running, jogging, walking, or swimming (Activity 22, 30, 51, or 46):

➤ 2a. How far did you usually walk/run/jog/swim?
Miles and tenths _ _ . _

Don't know/Not sure

Refused

➤ 3. How many times per week or per month did you take part in this activity during the past month?

Times per week 1 _____

Times per month 2 _____

Don't know/Not sure

Refused

➤ 4. And when you took part in this activity, for how many minutes or hours did you usually keep at it?

Hours and minutes _ : _ _

Don't know/Not sure

Refused

➤ 5. Was there another physical activity or exercise that you participated in during the last month?

Yes

No

Don't know/Not sure

Refused

If yes:

➤ 5a. What other type of physical activity gave you the next most exercise during the past month?

Activity [specify]: _ _ (SEE ACTIVITY LIST ABOVE)

Refused

(Repeat questions 2a, 3, and 4 from above.)

**Expected
Periodicity**

Biennial.

Comments

Adults are classified as participating in light or moderate physical activity if they report participating in an activity in the past month 5 to 28 times per week and 30 to 720 minutes for each time.

National data are not comparable to Rhode Island estimates: the data sources are different, the national survey is administered by personal interview, and the State survey is administered by telephone; the questions are different with neither survey accounting for people whose jobs may require regular or vigorous physical activity that is not reported in response to these questions; and the national data are age adjusted to the 2000 standard population, Rhode Island data are not.



**1-2. Increase the proportion of adolescents who engage in vigorous physical activity that promotes cardiorespiratory fitness 3 or more days per week for 20 or more minutes per occasion.
(Healthy People 2010 Objective 22-7)**

Rhode Island Data Source	Youth Risk Behavior Survey (YRBS), Office of Health Statistics, Rhode Island Department of Health; CDC, NCCDPHP.
National Data Source	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
Measure	Percent.
Baseline	62 (1997).
Numerator	Number of students in grades 9 through 12 who report exercising or participating for at least 20 minutes in physical activity that made them sweat and breathe hard on 3 or more of the 7 days preceding the survey.
Denominator	Number of students in grades 9 through 12 in the survey population.
Population Targeted	Students in grades 9 through 12.
Questions Used To Obtain Rhode Island Data	From the 1997 Youth Risk Behavior Surveillance System: <ul style="list-style-type: none"> ➤ <i>On how many of the past 7 days did you exercise or participate in physical activity for at least 20 minutes that made you sweat and breathe hard, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities?</i>

0 days

1 day

2 days

3 days

4 days

5 days

6 days

7 days

**Expected
Periodicity**

Biennial.

Comments

This objective differs from Healthy People 2000 objective 1.4, which used different question wording. The former YRBSS question was: "On how many of the past 7 days did you exercise or participate in sports activities for at least 20 minutes that made you sweat and breathe hard, such as basketball, jogging, swimming laps, tennis, fast bicycling, or similar aerobic activities?"

The national data are from the 1999 YRBS while Rhode Island baseline data are from the 1997 YRBS. Rhode Island conducted the YRBS in 1999 but had an inadequate sample for analysis. Data from the 2001 YRBS will be available in early 2002.



Overweight and Obesity

2-1. Reduce the proportion of adults who are obese. (Healthy People 2010 Objective 19-2)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Health and Nutrition Examination Survey (NHANES), CDC, NCHS (See Comments).
Measure	Percent
Baseline	17 (1998–2000).
Numerator	Number of persons aged 20 years and older with a BMI at or above 30.0, based upon self-reported height and weight.
Denominator	Number of persons in the survey population aged 20 years and older.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 1998-2000 Behavioral Risk Factor Surveillance System:</p> <ul style="list-style-type: none"> ➤ <i>About how much do you weigh without shoes?</i> <ul style="list-style-type: none"> <i>Weight</i> _____ <i>pounds (round)</i> <i>Don't know/Not sure</i> <i>Refused</i> ➤ <i>About how tall are you without shoes?</i> <ul style="list-style-type: none"> <i>Height</i> _____ / _____ <i>(Feet/Inches)</i> <i>Don't know/Not sure</i> <i>Refused</i>
Expected Periodicity	Annual.
Comments	<p>BMI is calculated in two steps:</p> <p>1) Conversion: convert weight from pounds to kilograms (weight in kilograms = weight in pounds / 2.2046) and height from inches to meters (height in meters = height in inches / 39.37).</p> <p>2) Calculation: BMI = (weight in kilograms/ (height in meters)²).</p>

Rhode Island data are not comparable to national data: the data sources are different (medical examination vs. telephone-based survey), NHANES obtains measured weights and heights without shoes while BRFSS uses self-reported heights and weights (body weight prevalence estimates derived from self-reported heights and weights tend to be lower than those derived from measured height and weight); national data are age adjusted to the 2000 standard population, Rhode Island data are not.



2-2. Reduce the proportion of children and adolescents who are overweight or obese. (Healthy People 2010 Objective 19-3c)

Children and adolescents aged 6 to 19 years.

Rhode Island Data Source	Rhode Island Health Interview Survey (RI-HIS), Office of Health Statistics, Rhode Island Department of Health.
National Data Source	National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.
Measure	Percent.
Baseline	25 (2001)
Numerator	Number of children and adolescents aged 6 to 19 years with a BMI at or above the gender- and age-specific 95th percentile from the CDC Growth Charts: United States.
Denominator	Number of children and adolescents in the survey population aged 6 to 19 years.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 2001 Rhode Island Health Interview Survey:</p> <p>➤ <i>About how much do (you/person) weigh without shoes on?</i></p> <p style="padding-left: 40px;"><i>Weight</i> _____ <i>pounds (round)</i></p> <p style="padding-left: 40px;"><i>Don't know/Not sure</i></p> <p style="padding-left: 40px;"><i>Refused</i></p> <p>➤ <i>About how tall are (you/person) without shoes on?</i></p> <p style="padding-left: 40px;"><i>Height</i> _____ / _____ <i>(Feet/Inches)</i></p> <p style="padding-left: 40px;"><i>Don't know/Not sure</i></p> <p style="padding-left: 40px;"><i>Refused</i></p>
Expected Periodicity	Biennial.

Comments

BMI is calculated in two steps:

1) Conversion: convert weight from pounds to kilograms (weight in kilograms = weight in pounds / 2.2046) and height from inches to meters (height in meters = height in inches / 39.37).

2) Calculation: BMI = (weight in kilograms/ (height in meters)²).

The gender- and age-specific 95th percentile CDC Growth Charts: United States can be found at the following website: <http://www.cdc.gov/growthcharts/>

Rhode Island data are not comparable to national data: the data sources are different (medical examination vs. telephone-based survey), NHANES obtains measured weights and heights without shoes while BRFSS uses self-reported heights and weights (body weight prevalence estimates derived from self-reported heights and weights tend to be lower than those derived from measured height and weight); national data are age adjusted to the 2000 standard population, Rhode Island data are not.



2-3. Increase the proportion of persons aged 2 years and older who consume at least five daily servings of fruit/vegetables². Healthy People 2010 Objective 19-5 and 19-6)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	Continuing Survey of Food Intakes by Individuals (CSFII), USDA, ARS (See Comments).
Measure	Percent.
Baseline	27 (1998 and 2000 combined).
Numerator	Number of persons aged 18 years and older who report consuming five or more servings of fruit and/or vegetables daily.
Denominator	Number of persons in the survey population aged 18 years and older.

² This objective combines Healthy People 2010 objectives 19-5 and 19-6. This objective is not included in the 21 objectives chosen nationally to measure the national Leading Health Indicators. Rhode Island will measure this objective using BRFSS data which surveys people 18 years and older and does not include children under 18 years. In addition, the national objective 19-6 delineates that at least one-third of vegetables consumed should be dark green or orange. The BRFSS does not collect data on the color of vegetables consumed. Therefore, Rhode Island has amended its state objective to include the United States Dietary Association's recommendation of five servings of fruits and vegetables per day, regardless of vegetable color.

Population Targeted

Rhode Island civilian, noninstitutionalized population.

Questions Used To Obtain Rhode Island Data

From the 1998 and 2000 Behavioral Risk Factor Surveillance System:

For each of the following questions the possible responses are the number of servings:

___ *Per day*
___ *Per week*
___ *Per month*
___ *Per year*
Never
Don't know/ Not sure
Refused

- *How often do you drink fruit juices such as orange, grapefruit, or tomato?*
- *Not counting juice, how often do you eat fruit?*
- *How often do you eat green salad?*
- *How often do you eat potatoes not including french fries, fried potatoes, or potato chips?*
- *How often do you eat carrots?*
- *Not counting carrots, potatoes, or salad, how many servings of vegetables do you usually eat? (Example: A serving of vegetables at both lunch and dinner would be two servings.)*

Expected Periodicity

Biennial.

Comments

State-level data on fruit and vegetable consumption are collected biennially by BRFSS for persons 18 years and older. No State-level data for younger children are available from this surveillance system. These data enable Rhode Island to track (1) the proportion of the population that consumes five or more servings of fruits and vegetables daily, (2) mean intakes and trends in consumption, and (3) consumption of selected fruit and vegetable items. However, the food items and dietary data collection methods used in the BRFSS differ from those used by CSFII to track Healthy People 2010 objectives 19-5 and 19-6.

This objective is not included in the national set of objectives selected to monitor the progress of the Leading Health Indicator Overweight and Obesity.



Tobacco Use

3-1. Reduce cigarette smoking by adults. (Healthy People 2010 Objective 27-1a)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Health Interview Survey (NHIS), CDC, NCHS.
Measure	Percent.
Baseline	23 (1998-2000).
Numerator	Number of adults aged 18 years and older who have smoked at least 100 cigarettes in lifetime and who now report smoking cigarettes everyday or some days.
Denominator	Number of adults aged 18 years and older in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 1998 Behavioral Risk Factor Surveillance System:</p> <ul style="list-style-type: none"> ➤ <i>Have you smoked at least 100 cigarettes in your entire life?</i> <ul style="list-style-type: none"> <i>Yes</i> <i>No</i> <i>Don't Know/Not Sure</i> <i>Refused</i> [If yes:] <ul style="list-style-type: none"> ○ <i>Do you now smoke cigarettes everyday, some days, or not at all?</i> <ul style="list-style-type: none"> <i>Everyday</i> <i>Some days</i> <i>Not at all</i> <i>Refused</i>
Expected Periodicity	Annual.
Comments	Persons are considered as using cigarettes if they report that they smoked at least 100 cigarettes in their lifetime and now report smoking cigarettes everyday or some days.

While the questions from the BRFSS are comparable to those included in the NHIS, the national data are not comparable to Rhode Island data; data from the NHIS are age adjusted to the 2000 standard population, the Rhode Island BRFSS data are not.



3-2. Reduce cigarette smoking by adolescents. (Healthy People 2010 Objective 27-2b)

Rhode Island Data Source	Youth Risk Behavior Survey (YRBS), Office of Health Statistics, Rhode Island Department of Health; CDC, NCCDPHP.
National Data Source	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
Measure	Percent.
Baseline	35 (1997).
Numerator	Number of students in grades 9 through 12 who reported having smoked cigarettes on 1 or more of the 30 days preceding the survey.
Denominator	Number of students in grades 9 through 12 in the survey population.
Population Targeted	Students in grades 9 through 12.
Questions Used To Obtain Rhode Island Data	From the 1997 Youth Risk Behavior Survey: <ul style="list-style-type: none"> ➤ <i>During the past 30 days, on how many days did you smoke cigarettes?</i>
Expected Periodicity	Biennial.
Comments	The national data are from 1999 while Rhode Island baseline data are from the 1997 YRBS. Rhode Island conducted the YRBS in 1999 but had an inadequate sample for analysis. Data from the 2001 YRBS will be available in early 2002.



Substance Abuse

4-1. Increase the proportion of adolescents *not* using alcohol or any illicit drugs during the past 30 days. (Healthy People 2010 Objective 26-10a)

Rhode Island Data Source	Youth Risk Behavior Survey (YRBS), Office of Health Statistics, Rhode Island Department of Health; CDC, NCCDPHP.
National Data Source	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
Measure	Percent.
Baseline	45 Alcohol and illicit drug use; 48 alcohol only; 96 cocaine only; 71 marijuana only - (1997).
Numerator	Number of students in grades 9-12 who reported not using any alcohol, marijuana, or cocaine in the past 30 days.
Denominator	Number of students in grades 9-12 in the survey population.
Population Targeted	Students in grades 9-12.
Questions Used To Obtain Rhode Island Data	<p>From the 1997 Youth Risk Behavior Survey:</p> <ul style="list-style-type: none"> ➤ <i>During the past 30 days, on how many days did you have at least one drink of alcohol?</i> <ul style="list-style-type: none"> <i>0 days</i> <i>1 or 2 days</i> <i>3 to 5 days</i> <i>6 to 9 days</i> <i>10 to 19 days</i> <i>20 to 29 days</i> <i>All 30 days</i> <i>Missing</i> ➤ <i>During the past 30 days, how many times did you use Marijuana?</i> <ul style="list-style-type: none"> <i>0 times</i> <i>1 or 2 times</i> <i>3 to 9 times</i> <i>10 to 19 times</i> <i>20 to 39 times</i> <i>40 or more times</i> <i>Missing</i>

- *During the past 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase?*

0 times
1 or 2 times
3 to 9 times
10 to 19 times
20 to 39 times
40 or more times
Missing

**Expected
Periodicity**

Biennial.

Comments

Alcohol or illicit drug use by students in grades 9-12 is a proxy measure, and is not comparable to the national data. Rhode Island estimates are based upon students in grades 9-12 who reported not using any alcohol, marijuana, or cocaine in the past 30 days.

The national data from NHSDA track adolescents ages 12-17 years who did not use any of the following substances in the past month: alcohol, marijuana or hashish, cocaine (including “crack”), inhalants, hallucinogens (including PCP and LSD), heroin, or any nonmedical use of analgesics, tranquilizers, stimulants, or sedatives. The answers for each of the substances are examined for each respondent. Persons are considered to have not used alcohol or illicit drugs if they report no use in the past 30 days of any one of the substances.

Rhode Island conducted the YRBS in 1999 but had an inadequate sample for analysis. Data from the 2001 YRBS will be available in early 2002.



4-2. Reduce the proportion of adults using any illicit drug during the past 30 days. ((Healthy People 2010 Objective 26-10c))

Rhode Island Data Source	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
National Data Source	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
Measure	Percent.
Baseline	7 (1999)
Numerator	Number of adults aged 18 years and older who report use of any illicit drugs during the past 30 days.
Denominator	Number of adults aged 18 years and older.
Population Targeted	Rhode Island civilian, noninstitutionalized population.

**Questions Used To
Obtain Rhode Island
Data**

From the 1999 National Household Survey on
Drug Abuse:

[The following question is asked separately for each
illicit drug: marijuana or hashish, cocaine, “crack,”
heroin, hallucinogens, and inhalants:]

- *How long has it been since you last used
[marijuana or hashish]?*

*If your answer is within the past 30 days, mark
the first box.*

*If your answer is more than 30 days ago but
within the past 12 months, mark the second box.*

*If your answer is more than 12 months ago but
within the past 3 years, mark the third box.*

*If your answer is more than 3 years ago, mark
the next-to-last box.*

*If you have never used [marijuana/hashish] in
your life, mark the last box.*

[The following questions are asked separately for
non-medical use of the following: analgesics
(prescription pain killers), tranquilizers, stimulants,
and sedatives:]

- *As you read the following list of [analgesics
(prescription pain killers)/tranquilizers/
stimulants/sedatives], please mark one box
beside each [analgesic (prescription pain
killer)/tranquilizer/stimulant/sedative] to
indicate whether you have ever used that
[analgesic (prescription pain killer)/tranquilizer/
stimulant/sedative] when it was not prescribed
for you, or that you took only for the experience
or feeling it caused. Again, we are interested in
all kinds of [analgesics (prescription pain
killers)/
tranquilizers/stimulants/sedatives], in pill or
non-pill form.*

[This question is followed by a list of common
drugs specific to each of the following
categories: analgesics (prescription pain killers),
tranquilizers, stimulants, and sedatives.]

- *Have you ever used a [analgesic (prescription
pain killer)/tranquilizer/stimulant/sedative]
whose name you don't know that was not
prescribed for you, or that you took only for the
experience or feeling it caused? If “YES,” mark
the first box, if “NO,” mark the second box.*

- *Have you ever used an other [analgesic (prescription pain killer)/ tranquilizer/ stimulant/ sedative] besides the ones listed above, that was not prescribed for you, or that you took only for the experience or feeling it caused? PLEASE PRINT NAME(S) OF OTHER [ANALGESICS (PRESCRIPTION PAIN KILLERS)/ TRANQUILIZERS/ STIMULANTS/ SEDATIVES] BELOW. If “YES,” mark the first box, if “NO,” mark the second box.*

[If the respondent reported use of any [analgesic (prescription pain killer)/ tranquilizer/ stimulant/ sedative] they are asked:]

- *How long has it been since you last used [an analgesic (prescription pain killer)/ tranquilizer/ stimulant/ sedative] that was not prescribed for you, or that you took only for the experience or feeling it caused?*

If your answer is within the past 30 days, mark the first box.

If your answer is more than 30 days ago but within the past 12 months, mark the second box.

If your answer is more than 12 months ago but within the past 3 years, mark the third box.

If your answer is more than 3 years ago, mark the next-to-last box.

Comments

Illicit drug use is defined as using at least one of the following substances in the past month: marijuana or hashish, cocaine (including “crack”), inhalants, hallucinogens (including PCP and LSD), heroin, or any nonmedical use of analgesics, tranquilizers, stimulants, or sedatives.

Respondents are considered to have used illicit drugs if they report use in the past 30 days of any of the listed substances.

Data are only available from NHSDA for statewide estimates at this time

(<http://www.samhsa.gov/oas/NHSDA/99StateTabs/toc.htm>).

Currently NHSDA does not provide select population estimates for each state. Rhode Island data are based upon small area estimation modeling techniques, as described by NHSDA.

(<http://www.samhsa.gov/oas/NHSDA/99StateTabs/Preface.htm#TopOfPage>)



4-3. Reduce binge drinking by adults in the past 30 days. (Healthy People 2010 Objective 26-11c)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
Measure	Percent.
Baseline	16 (1999).
Numerator	Number of adults aged 18 years and older who report having five or more drinks on an occasion, one or more times in the past month.
Denominator	Number of adults aged 18 years and older.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 1999 Behavioral Risk Factor Surveillance System:</p> <p>➤ <i>During the past month, have you had at least one drink of any alcoholic beverage such as beer, wine, wine coolers, or liquor?</i> <i>Yes</i> <i>No</i> <i>Don't know/ Not sure</i> <i>Refused</i></p> <p><i>Considering all types of alcoholic beverages, how many times during the past month did you have 5 or more drinks on an occasion?</i> <i>Number of times __ __</i> <i>None</i> <i>Don't know/ Not sure?</i> <i>Refused</i></p>
Expected Periodicity	Biennial.
Comments	These data are not comparable with estimates obtained to track the national objective; the data sources are different and the questions from BRFSS and NHSDA used to measure the objective are different.



Responsible Sexual Behavior

5-1. Increase the proportion of adolescents* who have never had sexual intercourse, have abstained from sexual intercourse in the past 3 months, or used condoms at last sexual intercourse . (Healthy People 2010 Objective 25-11)

Rhode Island Data Source	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
National Data Source	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP.
Measure	Percent.
Baseline	86 (1997).
Numerator	Number of students in grades 9 through 12 who report that they have never had sexual intercourse; or who have had sexual intercourse, but not in the past 3 months; or who have had sexual intercourse in the past 3 months but used a condom at last sexual intercourse.
Denominator	Number of students in grades 9 through 12 in the survey population.
Population Targeted	Students in grades 9 through 12.
Questions Used To Obtain Rhode Island Data	<p>From the 1997 Youth Risk Behavior Surveillance System:</p> <ul style="list-style-type: none"> ➤ <i>Have you ever had sexual intercourse?</i> ➤ <i>During the past three months, with how many people have you had sexual intercourse?</i> <ul style="list-style-type: none"> <i>I have never had sexual intercourse</i> <i>I have had sexual intercourse, but not in the past 3 months</i> <i>1 person</i> <i>2 people</i> <i>3 people</i> <i>4 people</i> <i>5 people</i> <i>6 or more people</i> ➤ <i>The last time you had sexual intercourse, did you or your partner use a condom?</i> <ul style="list-style-type: none"> <i>I have never had sexual intercourse</i> <i>yes</i> <i>no</i>
Expected Periodicity	Biennial.

Comments The national data are from 1999 while Rhode Island baseline data are from the 1997 YRBS. Rhode Island conducted the YRBS in 1999 but had an inadequate sample for analysis. Data from the 2001 YRBS will be available in early 2002.



5-2. Increase the proportion of unmarried, sexually active persons who use condoms. (Healthy People 2010 Objective 13-6)

(Developmental) Females aged 18 to 44 years.

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Survey of Family Growth (NSFG), CDC, NCHS.
Measure	Percent.
Baseline	30 (2002).
Numerator	Number of sexually active, unmarried females aged 18 to 44 years who reported using a condom at last sexual intercourse.
Denominator	Number of sexually active, unmarried females aged 18 to 44 years in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 2000 Behavioral Risk Factor Surveillance System:

During the past 12 months, with how many people have you had sexual intercourse?

Number__ __
None
Don't know/Not sure
Refused

Was a condom used the last time you had sexual intercourse?

Yes
No
Don't know/Not sure
Refused

Are you:

Married

Divorced

Widowed

Separated

Never married

A member of an unmarried couple?

Refused

**Expected
Periodicity**

Periodic.

Comments

Sexually active is defined as having sexual intercourse with one or more partners in the past 12 months.

Data from Rhode Island are not comparable with the national data for this objective. The data sources, survey methodology, and survey questions are different. The definitions for being sexually active differ between surveys. In the NSFG, sexually active are those women who have had intercourse in the 3 months prior to interview, and condom use is defined as either using a female condom (vaginal pouch) or their partner used a condom (rubber) at their last intercourse.



(Developmental) Males aged 18 to 49 years.

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Survey of Family Growth (NSFG), CDC, NCHS.
Measure	Percent.
Baseline	47 (2002)
Numerator	Number of sexually active, unmarried males aged 18 to 49 years who reported using a condom at last sexual intercourse.
Denominator	Number of sexually active, unmarried males aged 18 to 49 years in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 1998-2000 Behavioral Risk Factor Surveillance System:

During the past 12 months, with how many people have you had sexual intercourse?

Number__ __
None
Don't know/Not sure
Refused

Was a condom used the last time you had sexual intercourse?

Yes
No
Don't know/Not sure
Refused

Are you:

Married
Divorced
Widowed
Separated
Never married
A member of an unmarried couple?

Refused

**Expected
Periodicity**

Periodic.

Comments

Sexually active is defined as having sexual intercourse with one or more partners in the past 12 months.

Data from Rhode Island are not comparable with the national data for this objective. The data sources, survey methodology, and survey questions are different. The definitions for being sexually active differ between surveys. In the NSFG, sexually active are those men who have had intercourse in the 3 months prior to the interview, and condom use is defined as either the female partner using a female condom (vaginal pouch) or the male partner using a condom (rubber) at their last intercourse.



<h2 style="text-align: center;">Mental Health</h2>
--

6-1. Increase the proportion of adults with recognized depression who receive treatment.

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP
National Data Source	National Household Survey on Drug Abuse (NHSDA), SAMHSA.
Measure	Percent.
Baseline	51 (2002).
Numerator	Number of adults aged 18 years and older who report symptoms of depression and that they received help from a mental health professional.
Denominator	Number of adults aged 18 years and older in the survey population who report symptoms of depression.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 2002 Behavioral Risk Factor Surveillance System.</p> <p>Note: In 2002, due to miscommunications questions RI11_1a and RI11_2a were omitted from the set of questions used to obtain a measure of major depressive episode. The complete set of questions will be used on RI's BRFSS in 2005. See comment below for explanation of method used to obtain baseline data from the 2002 BRFSS data.</p> <p><i>RI11_1 During the past 12 months, was there ever a time when you felt sad, blue, or depressed for 2 weeks or more in a row?</i></p> <ol style="list-style-type: none"> 1 Yes {Go to RI11_2} 2 No {Go to RI11_1a} 3 If volunteered: "I was on medication/antidepressants" {Go to RI11_1a} 7 Don't know/Not sure {Go to RI11_1a} 9 Refused {Go to Next RI11_1a}

RI11_1a. During the past 12 months, was there ever a time lasting two weeks or more when you lost interest in most things like hobbies, work, or activities that usually give you pleasure?

- 1 Yes **{Go to RI11_2a}**
- 2 No **{Go to RI11_1a}**
- 4 If volunteered: "I was on medication. antidepressants" **{Go to RI11_1a}**
- 7 Don't know/Not sure **{Go to RI11_1a}**
- 9 Refused **{Go to Next RI11_1a}**

RI11_2. For the next few questions, please think of the two-week period during the past 12 months when these feelings were worst. During that time, did the feeling of being sad, blue, or depressed usually last all day long, most of the day, about half the day, or less than half the day?

- 1 All day long **(Go to RI11_3)**
- 2 Most of the day **(Go to RI11_3)**
- 3 About half the day **(Go to RI11_3)**
- 4 Less than half the day **(Go to RI11_3)**
- 7 Don't know/Not sure **(Go to RI11_3)**
- 8 Refused **(Go to RI11_3)**

RI11_2a. For the next few questions, please think of the Two-week period during the past 12 months when you had the most complete loss of interest in things. During that two-week period, did the loss of interest usually last all day long, most of the day, about half the day, or less than half the day?

- 1 All day long
- 2 Most of the day
- 3 About half the day
- 4 Less than half the day
- 7 Don't know/Not sure
- 9 Refused **(Go to RI11_3)**

RI11_3. During those two weeks, did you feel this way every day, almost every day, or less often?

- 1 Every day
- 2 Almost every day
- 3 Less often
- 7 Don't know/Not sure
- 9 Refused

RI11_4. (If RI11_1a = 1 go to RI11_5) During those two weeks, did you lose interest in most things?

- 1 Yes
- 2 No
- 3 Don't know/Not sure
- 4 Refused

RI11_5 (During those two weeks) Did you feel tired out or low energy all the time?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

RI11_6. (During those two weeks) Did you gain weight, lose weight, or stay about the same?

(Interviewer: If R asks "Are we still talking about the same two weeks?" Answer "Yes.")

- 1 Gained weight
- 2 Lost weight
- 3 Both gained and lost
- 4 Stayed the same {Go to RI11_8}
- 5 Was on diet (If volunteered) {Go to RI11_8}
- 7 Don't Know/Not sure {Go To RI11_8}
- 9 Refused {Go to RI11_8}

RI11_7. About how much did you (gain/lose?)

- 777 Don't know/Not sure
- 999 Refused

RI11_8. (During those two weeks) Did you have more trouble falling asleep than you usually do?

- 1 Yes
- 2 No {Go to RI11_10}
- 7 Don't know/Not sure {Go to RI11_10}
- 9 Refused {Go to RI11_10}

RI11_9. Did that happen every night, nearly every night, or less often during those two weeks?

- 1 Every night
- 2 Nearly every night
- 3 Less often
- 7 Don't know/Not sure
- 9 Refused

RI11_10. (During those two weeks) Did you have more trouble concentrating than usual?

(Interviewer: If R asks "Are we still talking about the same two week?" Answer "yes.")

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

RI11_11. At these times, people sometimes feel down on themselves, no good, worthless. (During those two weeks) Did you feel this way?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

RI11_12. (During those two weeks) Did you think a lot about death- either your own, someone else's or death in general?

(Interviewer: If R asks "Are we still talking about the same two week?" Answer "yes.")

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

{IF YES TO RI11_1 GO TO RI11_13, OTHERWISE GO TO NEXT SECTION}

NOW WE HAVE SOME QUESTIONS ABOUT MEDICAL TREATMENTS YOU MAY HAVE HAD AS AN OUTPATIENT OR IN A HOSPITAL.

RI11_13. Have you received treatment for psychological problems or emotional difficulties at a mental health clinic or by a mental health professional on an outpatient basis in the past 12 months?

- 1 Yes
- 2 No
- 7 Don't know/Not sure
- 9 Refused

RI11_14. During the past 12 months, how many different times have you stayed overnight or longer in a hospital to receive treatment for psychological or emotional difficulties?

- Number of overnight psychiatric stays
- 88 None
- 77 Don't know/Not sure
- 99 Refused

**Expected
Periodicity**

Annual.

Comments

This objective is based on questions used in the 1997 NHSDA, the baseline for the national objective. These questions were included in a state-added module in the 2002 BRFSS and are expected to be measured annually or by the BRFSS.

A depression index, which is constructed based upon the responses to the depression screening questions, will be used to derive an estimate of those persons with recognized depression. The depression index is based upon the same index used to derive the national baseline estimates for this objective.

Questions RI 1_1 and RI 1_1a are critical screening questions determining which respondents will be asked the full set of questions used to determine whether or not respondents experienced Major Depressive Episode during the prior 12 months. A prevalence estimate based only on the first screening question will be an under estimate. Only persons responding positively to RI1_1 and RI1_1a are asked the questions about medical treatment for psychological or emotional problems. Therefore a treatment estimate would also be an underestimate if RI1_1a was not asked. In order to make use of the data that was collected in 2002, we obtained the NHSDA 1997 dataset and determined what proportion of the total prevalence estimate for MDE and for MDE receiving treatment was accounted for by the second screening question. The second screening question accounted for only a small fraction of the total prevalence estimate of MDE in the National Data and for only a small fraction of the treatment estimate in the National Data. We extrapolated from the national data to the RI data to arrive at an estimate of total prevalence for MDE in RI, and at a total prevalence estimate for treatment in RI. Results of this estimation process are reflected in the baseline prevalence estimate and target which appear in reports published in 2004 and later. Information on the methods used in this estimation process for the BRFSS 2002 data are available from the Office of Health Statistics, RI Department of Health.



6.2 Reduce the suicide rate. (Healthy People 2010 Objective 18-1)

RI Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
National Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
Healthy People 2000	6.1 (Mental Health and Mental Disorders) (also

HEALTHY RHODE ISLANDERS 2010

Objective	7.2), age adjusted to 2000 standard population.
Measure	Rate per 100,000 (age adjusted).
Baseline	10/100,000 (1999)
Numerator	Number of deaths due to suicide (ICD-9 codes E950-E959).
Denominator	Number of persons.
Population Targeted	RI resident population.
Questions Used To Obtain the National Data	Not applicable.
Expected Periodicity	Annual.
Comments	<p>Suicides may be undercounted because of difficulty in the determination of suicidal intent by coroner or medical examiner.</p> <p>Data are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates.</p>



Injury and Violence

7-1. Reduce deaths caused by motor vehicle crashes. (Healthy People 2010 Objective 15-15a)

Rhode Island Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
National Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
Measure	Rate per 100,000 population (age adjusted—see Comments).
Baseline	9 (1996-98).
Numerator	Number of unintentional injury traffic deaths (ICD-9 codes E810.0-E819.9).
Denominator	Number of persons.
Population Targeted	Rhode Island resident population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.
Comments	Data are abstracted from CDC/WONDER data system, and are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates.



7-2. Reduce homicides. (Healthy People 2010 Objective 15-32)

Rhode Island Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
National Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
Measure	Rate per 100,000 population (age adjusted—see Comments).
Baseline	3 (1996-98).
Numerator	Number of deaths due to homicides (ICD-9 codes E960-E969).
Denominator	Number of persons.

HEALTHY RHODE ISLANDERS 2010

Population Targeted	Rhode Island resident population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.
Comments	<p>Data are abstracted from CDC/WONDER data system, and are age adjusted to the 2000 standard population. Age-adjusted rates are weighted sums of age-specific rates.</p> <p>This measure also differs slightly from the cause of death, homicide and legal intervention (ICD-9 E960-E978), which is shown in other publications.^{1, 2}</p>



<h2 style="text-align: center;">Environmental Quality</h2>
--

8-1. Reduce the proportion of persons exposed to air that does not meet the U.S. Environmental Protection Agency's health-based standards for ozone. (Healthy People 2010 Objective 8-1a)

Rhode Island Data Source	Rhode Island Department of Environmental Management(RI DEM); Aerometric Information Retrieval System, EPA, OAR.
National Data Source	Aerometric Information Retrieval System, EPA, OAR.
Measure	Percent.
Baseline	100 (1998).
Numerator	Number of persons living in nonattainment areas that exceed the National Ambient Air Quality Standards (NAAQS) for ozone in 1998.
Denominator	Number of persons residing in Rhode Island.
Population Targeted	Rhode Island resident population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.
Comments	<p>All areas (100 percent) are required by law to come into attainment no later than 2012 for all pollutant criteria except particulate matter 2.5, which will come into attainment by 2017. EPA's air quality monitoring and NAAQS data collection have historically taken place in large urban centers and other appropriate areas generally considered to have the Nation's poorest air quality.</p> <p>Nonattainment areas may include single counties, multiple counties, parts of counties, municipalities, or combinations of the preceding jurisdictions. When an area is designated as "nonattainment," it retains this status for 3 years, regardless of annual changes in air quality. Nonattainment areas may also include jurisdictions in which the source of the pollutants are located, even if that jurisdiction meets all NAAQS.</p> <p>The areas monitored may change over time to reflect changes in air quality or the pollutants being monitored.</p>

The population estimates used for the baseline are based on 1990 census estimates and do not reflect growth or depletion of population since that date. The NAAQS were revised in 1997 by EPA, but the revisions are currently being contested in court; resolution of the court case may affect the population estimates in the baseline.



8-2. Reduce the proportion of non-smokers exposed to environmental tobacco smoke. (Healthy People 2010 Objective 27-10)³

Rhode Island Data Source	Rhode Island Health Interview Survey (RI-HIS), Office of Health Statistics, Rhode Island Department of Health.
National Data Source	National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.
Measure	Percent
Baseline	39 (2001)
Numerator	Number of households that report that there is no smoking regularly inside the house or apartment, no smoking in any vehicle (for households with children under the age of 18), and that there are rules against smoking in the house or apartment or family vehicle.
Denominator	Number of households in survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 2001 Rhode Island Health Interview Survey: <i>Do you or does someone else smoke regularly inside your house or apartment?</i> Yes No Don't know/Not sure Refused

³ Proxy Objective: To reduce the proportion of households where smoking is permitted inside the house or inside the car all or most of the time. Data include households reporting regular smoking in the house or apartment, regular smoking in the vehicle (for households with children under the age of 18), and those that have no rules prohibiting smoking in the house or car.

Do you or does someone else smoke regularly inside the vehicle your family uses for transportation?

*Yes
No
Don't know/Not sure
Refused*

Which statement best describes the rules about smoking inside your home? PLEASE READ:

*Smoking is not allowed anywhere inside your home
Smoking is allowed in some places or at some times
Smoking is allowed anywhere inside the home
There are no rules about smoking inside the home*

*Don't know/Not sure
Refused*

Which statement best describes rules about smoking inside your car? PLEASE READ:

*Smoking is not allowed anytime
Smoking is allowed anytime
Smoking is not allowed when there are children in the car
There are no rules about smoking inside the car
Nobody smokes who uses the car (volunteered)*

*Don't know/Not sure
Refused*

**Expected
Periodicity**

Biennial starting in 2001.

Comments

Data are not comparable with national baseline for this objective. National data are from NHANES, a medical examination-based survey, and are based upon cotinine levels in the participant's blood. Rhode Island data are from the RI-HIS and are based upon responses to survey questions. National data are also age-adjusted to the 2000 standard population; Rhode Island data are not.



8-3. Eliminate elevated blood lead levels in children. (Healthy People 2010 Objective 8-11)

**Rhode Island Data
Source**

Childhood Lead Poisoning Prevention Program, Rhode Island Department of Health.

**National Data
Source**

National Health and Nutritional Examination Survey (NHANES), CDC, NCHS.

Measure

Percent.

Baseline	12 (2000)
Numerator	Number of children less than 72 months (under 6 years) with blood lead levels meeting or exceeding 10µg/dL.
Denominator	Number of children less than 72 months (under 6 years) screened annually for blood lead levels.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.
Comments	This objective differs from the national data, which monitors children aged 1 to 5 years. Once a child is tested and has an elevated blood lead level, that child is likely to be re-tested in subsequent years, and may reappear in estimates that span across years for the Lead Screening Data, Childhood Lead Poisoning Prevention Program.

8-4. Increase the proportion of persons served by community water systems who receive a supply of drinking water that meets the regulations of the Safe Drinking Water Act. (Healthy People 2010 Objective 8-5)

Rhode Island Data Source	Office of Drinking Water Quality, Public Water System Supervision Compliance Data System
Measure	Percent.
Baseline	81 (2002)
Numerator	Number of RI community public water systems with a reported violation during the calendar year, multiplied by 100.
Denominator	Number of RI community public water systems.
Population Targeted	RI population, except those served by private wells.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.

8-5. Increase the proportion of persons who live in homes tested for Radon concentrations. (Healthy People 2010 Objective 8-18)

Rhode Island Data Source	Home and Public/High Priority Buildings Testing System, Rhode Island Department of Health.
National Data Source	1998 NHIS, CDC, NCHS.
Measure	Percent.
Baseline	5% (1994-2000)
Numerator	Number of residential radon tests in residential properties performed by State certified radon measurement consultants.
Denominator	Number of residential properties in Rhode Island. 2000 US Census Data
Population Targeted	Rhode Island civilian population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Ongoing
Comments	The data are not directly comparable to national data in that the RI radon testing database tracks only radon tests performed by certified measurement consultants and does not include homeowner-performed tests. Therefore the percent of RI homes tested will trail the national percentage. Our goal is to significantly increase the percentage of RI homes in which radon gas levels have been tested by a certified individual.

8-6. Reduce infections caused by key foodborne pathogens. (Healthy People 2010 Objective 10-1)

Rhode Island Data Source	Rhode Island Department of Health Division of Disease Prevention and Control
Measure	Rate per 100,000 population
Baseline	Campylobacter species: 16 (2002) Salmonella species: 19 (2002)
Numerator	Number of laboratory confirmed cases per 100,000 population.

HEALTHY RHODE ISLANDERS 2010

Denominator	Number of persons
Population Targeted	RI population
Questions Used To Obtain Rhode Island Data	Not applicable
Expected Periodicity	Annual



Immunization

9-1. Increase the proportion of young children and adolescents who receive all vaccines that have been recommended for universal administration for at least 5 years. (Healthy People 2010 Objective 14-24a)

Rhode Island Data Source	National Immunization Survey (NIS), CDC, NIP and NCHS.
National Data Source	National Immunization Survey (NIS), CDC, NIP and NCHS.
Measure	Percent
Baseline	81 (2000)
Numerator	Number of children aged 19 to 35 months receiving at least four doses of diphtheria-tetanus-acellular pertussis (DtaP), at least three doses of polio, at least one dose of measles-mumps-rubella (MMR), at least three doses of <i>Haemophilus influenzae</i> B (Hib), and at least three doses of hepatitis B antigens.
Denominator	Number of children aged 19 to 35 months.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	<p>From the 2000 National Immunization Survey Household Survey:</p> <ul style="list-style-type: none"> ➤ <i>How many D-T-P or D-T shots (sometimes called a D-P-T shot, diphtheria-tetanus-pertussis shot, baby shot, three-in-one shot) has (<u>Sample child</u>) ever received?</i> ➤ <i>How many polio vaccine shots (by mouth, pink drops, or by a polio shot) has (<u>Sample child</u>) ever received?</i> ➤ <i>How many measles or M-M-R (Measles-Mumps-Rubella) shots has (<u>Sample child</u>) ever received?</i> ➤ <i>How many H-I-B shots (this is for Meningitis and is called Haemophilus Influenzae), H-I-B vaccine, or H flu vaccine has (<u>Sample child</u>) ever received?</i> ➤ <i>How many Hepatitis B shots has (<u>Sample child</u>) ever received?</i> ➤ <i>Other shots received?</i> <p>From the 2000 National Immunization Survey Provider Record Check:</p> <ul style="list-style-type: none"> ➤ <i>Specify month, day and year that each immunization was given, either by the office or another provider (OP), as documented in the records.</i>

**Expected
Periodicity**

Annual.

Comments

Any new vaccines that have been universally recommended for at least 5 years will be added to the series over the course of Healthy People 2010.

The National Immunization Survey (NIS) is a continuing nationwide telephone sample survey among children aged 19 to 35 months. Estimates of vaccine-specific coverage are available for the United States, each State, and 28 urban areas considered to be high risk for under-vaccination. NIS uses a two-phase sample design. First, a random-digit-dialing (RDD) sample of telephone numbers is drawn. In 1995, 69 percent of households with age-eligible children completed vaccination interviews, yielding data for 31,997 children.

The interviewer also asks for permission to contact the vaccination provider. In the second phase, all vaccination providers are contacted by mail. Vaccination information from providers' records was obtained for 52 percent of all children who were eligible for provider followup in 1995 and 64 percent in 1996. Providers' responses are combined with information obtained from households to provide a more accurate estimate of vaccination coverage levels. Final estimates are adjusted for noncoverage of nontelephone households.

For further information, visit the National Immunization Survey Web site at <http://www.nisabt.org/>.

Statistical adjustments are made to minimize bias due to (1) lower coverage among children living in households without telephones, (2) discrepancies between vaccinations reported by household compared with immunization providers, and (3) differences in race/ethnic population distribution in sample compared to race/ethnic population distribution at birth.



9-2. Increase the proportion of adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease. (Healthy People 2010 Objective 14-29)

Noninstitutionalized adults aged 65 years and older

Influenza vaccine.

**Rhode Island Data
Source**

Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.

HEALTHY RHODE ISLANDERS 2010

National Data Source	National Health Interview Survey (NHIS), CDC, NCHS.
Measure	Percent.
Baseline	74 (1998 and 2000 combined).
Numerator	Number of adults aged 65 years and older who report receiving an influenza vaccination in the past 12 months.
Denominator	Number of adults aged 65 years and older.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 1999 Behavioral Risk Factor Surveillance System: <ul style="list-style-type: none"> ➤ <i>During the PAST 12 MONTHS, have you had a flu shot?</i> <ul style="list-style-type: none"> <i>Yes</i> <i>No</i> <i>Don't Know/Not Sure</i> <i>Refused</i>
Expected Periodicity	Annual.
Comments	Rhode Island baseline data are not comparable to the national baseline for this objective. National data are age adjusted to the 2000 standard population.



Pneumococcal vaccine.

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Health Interview Survey (NHIS), CDC, NCHS.
Measure	Percent.
Baseline	58 (1998 and 2000 combined).
Numerator	Number of adults aged 65 years and older who report ever receiving a pneumococcal vaccination.
Denominator	Number of adults aged 65 years and older in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 1999 Behavioral Risk Factor Surveillance System:

- *Have you EVER had a pneumonia vaccination?*
 - Yes*
 - No*
 - Don't Know/Not Sure*
 - Refused*

**Expected
Periodicity**

Annual.

Comments

Rhode Island baseline data are not comparable to the national baseline for this objective; national data are age adjusted to the 2000 standard population; Rhode Island data are not.



Access to Health Care

10-1. Increase the proportion of persons with health insurance. (Healthy People 2010 Objective 1-1)

Rhode Island Data Source	Behavioral Risk Factor Surveillance System (BRFSS), CDC, NCCDPHP.
National Data Source	National Health Interview Survey (NHIS), CDC, NCHS.
Measure	Percent.
Baseline	91 (1998-2000).
Numerator	Number of persons under age 65 years who report coverage by any type of public or private health insurance.
Denominator	Number of persons aged 18-64 years in the survey population.
Population Targeted	Rhode Island civilian, noninstitutionalized population.
Questions Used To Obtain Rhode Island Data	From the 2000 Behavioral Risk Factor Surveillance System:

Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?

*Yes
No
Don't Know/Not Sure
Refused*

Medicare is a coverage plan for people 65 or over and for certain disabled people. Do you have Medicare?

*Yes
No
Don't Know/Not Sure
Refused*

What type of health care coverage do you use to pay for most of your medical care? Is it coverage through:

Coverage Code: PLEASE READ

- 1) Your employer*
- 2) Someone else's employer*
- 3) A plan that you or someone else buys on your own*
- 4) Medicare*
- 5) Medicaid or Medical Assistance*
- 6) The military, CHAMPUS, TriCare, or the VA*
- 7) The Indian Health Service*
- 8) Some other source*

None

Don't know/Not sure

Refused

There are some types of coverage you may not have considered. Please tell me if you have any of the following:

Coverage through:

- 1) Your employer*
- 2) Someone else's employer*
- 3) A plan that you or someone else buys on your own*
- 4) Medicare*
- 5) Medicaid or Medical Assistance [or substitute state program name]*
- 6) The military, CHAMPUS, TriCare, or the VA [or CHAMP-VA]*
- 7) The Indian Health Service [or the Alaska Native Health Service]*
- 8) Some other source*

None

Don't know/Not sure

Refused

Expected Periodicity

Annual.

Comments

The definition for persons with health insurance coverage based on data from the BRFSS is any person who reports that they are covered by a health plan through insurance from: 1) their employer; 2) someone else's employer; 3) a plan that the respondent or somebody else buys on their own; 4) Medicare; 5) Medicaid or Medical Assistance; 6) the military, CHAMPUS, TriCare or the VA; 7) Indian Health Service; 8) some other source; or they state they have coverage through a health plan but do not know or refuse to identify which type of coverage they have.

Persons who answer that they do not have a health plan, but identify that they have a health plan in the follow up question on the different types of health insurance coverage they could have, are considered to be insured.

Persons who state they do not have a health plan and do not identify any of the types of coverage (options 1-8) listed above are considered uninsured.

Rhode Island baseline data are not comparable to the national baseline for this objective; national data are age adjusted to the 2000 standard population; Rhode Island data are not.



10-2. Increase the proportion of persons who have a specific source of ongoing care. (Healthy People 2010 Objective 1-4a)

RI Data Source	RI Behavioral Risk Factor Surveillance System
Measure	Percent.
Baseline	84 (2000)
Numerator	Number of adults aged 18 years and older who report having a specific source of care
Denominator	Number of adults aged 18 years and older
Population Targeted	RI civilian non-institutionalized adult population.
Questions Used To Obtain the RI Data	<p>From the 2000 BRFSS</p> <p><i>1. Is there one particular clinic, health center, doctor's office, or other place that you usually go to if you are sick or need advice about your health?</i></p> <ul style="list-style-type: none"> a. Yes GO TO 3 b. More than one place c. No STOP d. Don't know/Not sure STOP Refused STOP <p><i>2. Is there one of these places that you go to most often when you are sick or need advice about your health?</i></p> <ul style="list-style-type: none"> a. Yes b. No STOP c. Don't know/Not sure STOP d. Refused STOP

3. What kind of place is it?
 Would you say: **Please Read**
 a. A doctor's office or HMO
 b. A clinic or health center
 c. A hospital outpatient department
 d. A hospital emergency room
 e. An urgent care center
or
 f. Some other kind of place
 g. Don't know/Not sure (DO NOT READ)
 Refused

A hospital emergency room (d) is not included as a specific source of primary care.

Expected Periodicity

Annual.



10-3. Increase the proportion of pregnant women who receive early and adequate prenatal care. (Healthy People 2010 Objective 16-6b)

Rhode Island Data Source	Maternal and Child Health Database, Division of Family Health and Vital Records, Rhode Island Department of Health.
National Data Source	National Vital Statistics System (NVSS), CDC, NCHS.
Measure	Percent of live births.
Baseline	91 (1997-1999).
Numerator	Number of females receiving prenatal care in the first trimester (three months) of pregnancy.
Denominator	Number of live births.
Targeted Population	Rhode Island resident population.
Questions Used To Obtain Rhode Island Data	Not applicable.
Expected Periodicity	Annual.
Comments	For more information on this measure, contact the Division of Family Health, Rhode Island Department of Health (401-222-2312).

